Key Facts in Rural Health

October 2014

Rural Border Health Chartbook II

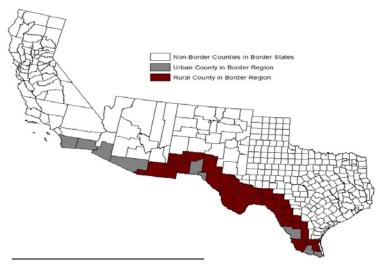
The forty-four U.S. counties in states that adjoin the border with Mexico (Arizona, California, New Mexico and Texas) share many health concerns with corresponding counties in Mexico. The U.S.-Mexico Border Health Commission established health goals for the region, in which eight of ten leading causes of death are the same across both countries. Within the U.S. Department of Health and Human Services, the Office of Rural Health Policy is responsible for facilitating intra-agency border health activities and addressing collaboration across programs to leverage resources and services of the Health resources and Services Administration along the border. The chartbook presents a cross-sectional analysis of border counties, urban and rural, comparing these counties to other counties within the four border states and to rural and urban counties in the rest of the U.S. We examined county-level rates and statistics for:

<u>Socio-demographic</u>: race/ethnicity of county populations, English proficiency, education, unemployment rate, median household income, housing deficiencies, households without vehicles available, children in poverty, children in single-parent homes, children eligible for free/reduced lunch, percent of population that are SNAP participants, food insecurity rates, violent crime rate

<u>Physical environment</u>: access to recreational facilities and parks, access to healthy food and fast food outlets

Access to care: mental health provider/population ratio, dentist/population ratio, primary care physician/population ratio, uninsured populations, proportion who could not access care due to cost

<u>Health outcomes:</u> HIV rates, chlamydia rates, teen birth rates, proportion of low weight births, infant and child mortality rates, injury death rates, motor vehicle crash death rate, ambulatory care sensitive condition hospital stays, years of potential life lost (estimated years at the county level)



The four border states of Arizona, California, New Mexico and Texas are shown in the map to the left. Tabular presentations comparing border counties to other counties in border states and to other U.S. rural and urban counties were prepared for each of the demographic characteristics and health outcomes studied.

United States-Mexico Border Health Commission (USMBHC) (2003). Healthy Border 2010: An Agenda for Improving Health on the United States-Mexico Border.



A full copy of this report can be obtained from the SCRHRC at http://rhr.sph.sc.edu

